

<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>	Attorney Docket Number	PD-02W150
	First Named Inventor	JOHN R. STOWELL
	<b>COMPLETE IF KNOWN</b>	
	Application Number	/
	Filing Date	HEREWITH
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Art Unit	
	Examiner Name	

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**REDUCED COMPONENT POWER CONVERTER WITH INDEPENDENT  
REGULATED OUTPUTS AND METHOD**

*(Title of the Invention)*

the specification of which

☐ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.


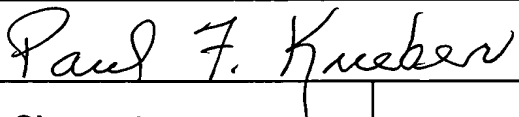
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>


☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer Number <input type="text"/> or Bar Code Label		OR <input checked="" type="checkbox"/> Correspondence address below	
Name <b>Thomas J. Finn, Esq.</b> <b>Raytheon Company</b>			
Address <b>P.O. Box 902 (E4/N119)</b>			
City <b>El Segundo</b>		State <b>CA</b>	ZIP <b>90245-0902</b>
Country <b>USA</b>	Telephone <b>520.794.7980</b>		Fax <b>520.794.8171</b>
<small>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</small>			
NAME OF SOLE OR FIRST INVENTOR :		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>John R.</b>		Family Name or Surname <b>Stowell</b>	
Inventor's Signature 			Date <b>7/10/03</b>
Residence: City <b>Sahuarita</b>	State <b>AZ</b>	Country <b>US</b>	Citizenship <b>US</b>
Mailing Address <b>1711 Placita De Niquel</b>			
City <b>Sahuarita</b>	State <b>AZ</b>	ZIP <b>85629</b>	Country <b>US</b>
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <b>Paul F.</b>		Family Name or Surname <b>Kueber</b>	
Inventor's Signature 			Date <b>7-8-03</b>
Residence: City <b>Clearwater</b>	State <b>FL</b>	Country <b>US</b>	Citizenship <b>US</b>
Mailing Address <b>2752 Northridge Dr. East</b>			
City <b>Clearwater</b>	State <b>FL</b>	ZIP <b>33761</b>	Country <b>US</b>
<input type="checkbox"/> Additional inventors are being named on the _1_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.			

IN WITNESS WHEREOF, I have executed this instrument.

FULL NAME OF SOLE OR JOINT INVENTOR John R. Stowell	INVENTOR'S SIGNATURE 	DATE 7/10/03
RESIDENCE (CITY AND STATE) Sahuarita, AZ. 85629		INVENTION AGREEMENT DATE 06/01/1999

STATE OF Arizona )

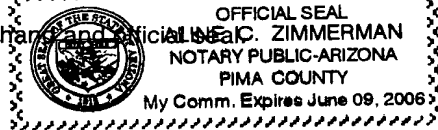
COUNTY OF Pima )

SS:

On July 10, 2003 before me, Lynette M. Kelly,  
a Notary Public in and for said State, personally appeared John R. Stowell

☐ personally known to me or ☒ proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.



Notary Public Lynette M. Kelly

FULL NAME OF SOLE OR JOINT INVENTOR Paul F. Kueber	INVENTOR'S SIGNATURE <u>Paul F. Kueber</u>	DATE 7-8-03
RESIDENCE (CITY AND STATE) Clearwater, FL. 33761		INVENTION AGREEMENT DATE 03/27/2000

STATE OF FLORIDA )

COUNTY OF PINEHURST )

SS:

On 7/8/2003 before me, Lynette Kelly,  
a Notary Public in and for said State, personally appeared Paul F. Kueber

☐ personally known to me or ☒ proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal.

Notary Public Lynette M. Kelly

